

DEPARTMENT OF RECREATION, PARKS AND CULTURAL ACTIVITIES

James B. Spengler Director 1108 Jefferson Street Alexandria, Virginia 22314

Phone (703)746-4343 Fax (703)838-6344

January 10, 2013

Cheerleading Coach,

The Alexandria Department of Recreation, Parks and Cultural Activities will host the Alexandria Spring Invitational for recreation level teams on Saturday, April 20 at T.C. Williams High School at 11:00 a.m. The school is located at 3330 King Street, Alexandria, VA. We would love for your team to compete and be a part of our competition. The entry fee for the competition is \$5.00 per cheerleader. Limited space is available and registration will only be confirmed with payment.

Teams will be able to compete in levels in each division. The competition will follow the safety and cheer level rules established by the U.S. All Star Federation. The rules accompany this letter and can be found at www.usasf.net. The competition will feature three age divisions; Pee Wee (ages 8 & under), Youth (12 & under) and Junior (16 & under). Crossovers can be included for \$10.00 for each crossover. Each team will receive a team trophy at the awards presentation after the competition. The time limit for team performances is 2:30.

Cheerleaders will also have the opportunity to compete in the jump off/tumble off for \$5.00. The jump off/tumble off will take place in the auxiliary gym before the competition begins. Participants can register the day of the competition for this event.

If your team is interested in competing, please return the team registration form, roster form, waiver release forms and cashier's check or money order by March 15 to the following address: ATTN: Alexandria Invitational/Recreation Services Division, 1108 Jefferson Street, Alexandria, VA, 22314. The check or money order should be made payable to the City of Alexandria. Teams will receive a confirmation once we receive team registration information and payment.

Tickets will also be sold at the door for \$10.00 (ages 13 & older) and \$5.00 (ages 5-12). Children ages 4 and under will be admitted free of charge. For more information, contact the Sports Office at 703.746.5402 or email tamika.coleman@alexandriava.gov

Sincerely,

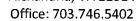
Tamika Coleman

Tamika Coleman Recreation Manager – Youth Sports



Alexandria Department of Recreation, Parks and Cultural Activities Recreation Services Division

1108 Jefferson Street Alexandria, VA 22314







REGISTRATION FORM ALEXANDRIA INVITATIONAL

Contact Person's Information

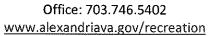
Organization Information

| Organization Name | | Contact Person's Name | | | |
|---|--|--|--|--|--|
| City/ | ['] State | Mailing Address | | | |
| Dayt | ime Phone Evening Phone | City, State and Zip Code | | | |
| Fax# | | Email Address | | | |
| | | | | | |
| | Team Name How it should appear on schedule and program book | Division & Level Total # of Cheerleaders | | | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 5 | | | | | |
| How to Register: Please complete this form to register up to 5 teams. Include one payment per program. Mail registration to: Alexandria Invitational/Recreation Services Division 1108 Jefferson Street | | Payment Information Team | | | |
| | | Cheerleaders X \$5 = | | | |
| | Alexandria, VA 22314 | Crossovers X \$10 = | | | |
| This registration agreement is an agreement between you, the team/organization registered above and the City of Alexandria, Recreation Department, which governs the terms and conditions | | Total Balance Due: | | | |
| which the City of Alexandria will conduct the event. As the responsible party for this registration and team/organization named above, I acknowledge that I have read the payment policies, weather related policy and cancellation policy governing events hosted by the City of Alexandria. Furthermore, I fully understand the financial | | Payment Options: Please check one | | | |
| | bilities associated with this registration and accept liability and all debts incurred as a result of this registration. | Make check payable to: City of Alexandria. | | | |
| Print Name | | All balances must be paid by March 15, 2013. | | | |
| ignatur | e Date | | | | |
| | | | | | |



Alexandria Department of Recreation, Parks and Cultural Activities **Recreation Services Division** 1108 Jefferson Street

Alexandria, VA 22314





MEDICAL AND PHOTOGRAPHY RELEASE FORM **ALEXANDRIA INVITATIONAL**

| Participant Name: | Date of Birth: | _ Age: |
|--|--|--|
| Organization Name: | | |
| Name of Parent/Guardian: | | |
| Address: | | |
| Phone: | Cell Phone: | |
| Email Address: | | |
| Please list participant's allergies to medi medical conditions that could impair par | MEDICAL INFORMATION cation, current medications being taken, ticipant's performance: | and any past or present |
| | a, Department of Recreation, Parks and C | |
| undersigned, realizing the risk of injury a discharge the City of Alexandria, its offic Department of Recreation and its superv demands for , upon or by reason of any i | to the standard to such programs, does/do here ters, agents and employees including but visors, from any and all actions, causes of injury which hereafter at any time may be ticipant has had a physical exam within the standard of characteristics. | eby release and forever not limited to the faction, claims and e sustained by |
| permission to verify the participant's bir | th date at his/her school. Per the City of ant is provided to the Alexandria Depart | eation Department Alexandria policies, |
| permission to verify the participant's bir registration information of each particip and Cultural Activities (ADRPCA) for recr I do hereby grant permission to photogra | th date at his/her school. Per the City of ant is provided to the Alexandria Depart | eation Department Alexandria policies, ment of Recreation, Parks uture advertisements, |
| permission to verify the participant's bir registration information of each particip and Cultural Activities (ADRPCA) for recr I do hereby grant permission to photogra website, marketing literature, or promot | th date at his/her school. Per the City of ant is provided to the Alexandria Departication programs only. aph or video tape my child or me for all fi | eation Department Alexandria policies, ment of Recreation, Parks uture advertisements, ecreation Department. |
| permission to verify the participant's bir registration information of each particip and Cultural Activities (ADRPCA) for recr I do hereby grant permission to photogra website, marketing literature, or promot | th date at his/her school. Per the City of ant is provided to the Alexandria Departiceation programs only. aph or video tape my child or me for all fittional videos for the City of Alexandria, R | eation Department Alexandria policies, ment of Recreation, Parks uture advertisements, ecreation Department. |



Alexandria Department of Recreation, Parks and Cultural Activities Recreation Services Division 1108 Jefferson Street Alexandria, VA 22314



Office: 703.746.5402 www.alexandriava.gov/recreation

TEAM ROSTER ALEXANDRIA INVITATIONAL

| | Organization Information | | | | |
|-------------------|--------------------------|--|--|--|--|
| Organization Name | | | | | |
| Team Name | | | | | |
| Division | Level | | | | |
| Coach #1 | Coach #2 | | | | |

| | Participant's Name | Date of Birth | Age | Gender (M/F) |
|----------|--------------------|---------------|--------|--------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| 11 | | | | |
| 12 | | | | |
| 13 | | | | |
| 14 | | | | |
| 15 | | | | |
| 16 | | | | |
| 17 | | | | |
| 18 | | | | |
| 19 | | | ****** | |
| 20 | | | *** | |
| 21 | | | | |
| 22 | | | | |
| 23 | | | | |
| 24 | | | | |
| 25 | | | | |
| 26 | | | | |
| 27 | | | | |
| 28 | | | | |
| 29 | | | | |
| 30 | | | | |
| <u> </u> | • | • | 1 | 1 |